

Controlled expenditure return by a recognised third party

Important: the accompanying explanatory notes should be read before completing this form.

A1 Details of recognised third party

Name

Regulated period Election(s)

Reference number

A2 Declaration and signature

I declare that I have examined the information in this return and that, to the best of my knowledge and belief, it is a complete and correct return as required by law, and that all expenses shown in it as paid have been paid by me or by a person authorised under section 90 of the Political Parties, Elections and Referendums Act 2000.

Signed Date
dd mm yyyy

Printed name Responsible person

Please return **all** sections of this return, drawing a bold line through any sections in which there is nothing to report.

A3 Audited return

Return audited: Yes No (tick one)

If applicable:

Name of auditor

Address

Town County Postcode

Name UNLAGED CAMPINGAS

Election 2010 GENERAL ELECTION

Date 3/8/10

Section B: Summary of expenditure

B1 Summary of expenditure incurred

	England £	Scotland £	Wales £	Northern Ireland £	Total £
Total amount of controlled expenditure incurred during the regulated period before becoming a recognised third party*	<u>243</u>	<u>27</u>	<u>18</u>	<u>/</u>	<u>288</u>
Total of payments made	<u>5549</u>	<u>589</u>	<u>399</u>		<u>6536</u>
Total of notional expenditure incurred	<u>726</u>	<u>80</u>	<u>54</u>		<u>861</u>
Total of unpaid claims	<u>/</u>	<u>/</u>	<u>/</u>	<u>/</u>	<u>/</u>
Total of disputed claims	<u>/</u>	<u>/</u>	<u>/</u>	<u>/</u>	<u>/</u>
Total	<u>6518</u>	<u>696</u>	<u>471</u>		<u>7685</u>

*Note: you do not have to provide further details about this expenditure.

B2 Donation return (TP4 (ii)) attached?

(tick as appropriate)

Yes

No

Section C: Payments made

C1 Statement of actual payments

Number of entries made in this section

8

Item number

1

Amount (£.pp)

88.10

Supplier

Name

REX FEATURES LTD

Address

18 VINE HILL

Town

LONDON

County

Postcode

EC1R 5DZ

Part(s) of United Kingdom to which expenditure relates

England

74

Scotland

8

Wales

6

Northern Ireland

Invoice/receipt submitted

Yes

No

(tick as appropriate)

Name UNLAGED CAMPAIGNS Election 2010 GENERAL ELECTION Date 3/8/10

Item number 2

Dates

Amount (£.pp) 287

Expense incurred 19 02 2010

Supplier

Claim for payment 27 02 2010

Name PRINTWORKS (SHEFFIELD) LTD.

Claim paid 15 03 2010
dd mm yyyy

Address UNIT 7+8 CARLISLE ST BUSINESS PARK CHAMBERS LANE

Town SHEFFIELD

County

Postcode S4 8DA

Part(s) of United Kingdom to which expenditure relates

England 242

Scotland 27

Wales 18

Northern Ireland

Invoice/receipt submitted Yes No (tick as appropriate)

Item number 3

Dates

Amount (£.pp) 2196

Expense incurred 28 02 2010

Supplier

Claim for payment 15 03 2010

Name IMANER CONSULTANTS

Claim paid 12 04 2010
dd mm yyyy

Address 14 WYNFORD GROVE

Town LEEDS

County

Postcode LS16 6JL

Part(s) of United Kingdom to which expenditure relates

England 1852

Scotland 205

Wales 139

Northern Ireland

Invoice/receipt submitted Yes No (tick as appropriate)

Name UNLAGED CAMMINGS Election 2010 GENERAL ELECTION Date 03/8/10

Item number 4

Amount (£.pp) 940

Supplier Name YOUGov PLC

Address 50 FEATHERSTONE ST

Town LONDON County Postcode EC1Y 8RT

Part(s) of United Kingdom to which expenditure relates
England 793 Scotland 88 Wales 59 Northern Ireland /

Invoice/receipt submitted Yes No (tick as appropriate)

Dates
Expense incurred 19 03 2010
Claim for payment 31 03 2010
Claim paid 12 04 2010
dd mm yyyy

Item number 5

Amount (£.pp) 200

Supplier Name PEOPLE FOR PRINT LTD

Address UNIT 10, RIVERSIDE PARK, SHEAF GARDENS

Town SHEFFIELD County Postcode S24 8TB

Part(s) of United Kingdom to which expenditure relates
England 169 Scotland 19 Wales 13 Northern Ireland /

Invoice/receipt submitted Yes No (tick as appropriate)

Dates
Expense incurred 15 04 2010
Claim for payment 15 04 2010
Claim paid 16 04 2010
dd mm yyyy

Name UNCKED CAMPAIGNS Election 2010 GENERAL ELECTION Date 3/8/10

Item number 6 Dates

Amount (£.pp) 1728 Expense incurred 31 03 2010

Supplier

Claim for payment 15 04 2010

Claim paid 17 05 2010
dd mm yyyy

Name IMANER CONSULTANTS

Address AS ABOVE

Town County Postcode

Part(s) of United Kingdom to which expenditure relates
England 1457 Scotland 161 Wales 109 Northern Ireland

Invoice/receipt submitted Yes No (tick as appropriate)

Item number 7 Dates

Amount (£.pp) 864 Expense incurred 30 04 2010

Supplier

Claim for payment 15 05 2010

Claim paid 15 06 2010
dd mm yyyy

Name IMANER CONSULTANTS

Address AS ABOVE

Town County Postcode

Part(s) of United Kingdom to which expenditure relates
England 729 Scotland 81 Wales 55 Northern Ireland

Invoice/receipt submitted Yes No (tick as appropriate)

Name Election Date

Item number Dates

Amount (£.pp) Expense incurred

Supplier Claim for payment

Name Claim paid
dd mm yyyy

Address

Town County Postcode

Part(s) of United Kingdom to which expenditure relates

England Scotland Wales Northern Ireland

Invoice/receipt submitted Yes No (tick as appropriate)

Item number

Amount (£.pp) Expense incurred

Supplier Claim for payment

Name Claim paid
dd mm yyyy

Address

Town County Postcode

Part(s) of United Kingdom to which expenditure relates

England Scotland Wales Northern Ireland

Invoice/receipt submitted Yes No (tick as appropriate)

C2 Statement of notional expenditure

Number of entries made in this section

Item number

Nature of expenditure

Value (£.pp)

Period/date expense incurred

 to
dd mm yyyy dd mm yyyy

Supplier

Name

Address

Town

County

Postcode

Part(s) of United Kingdom to which expenditure relates

England

Scotland

Wales

Northern Ireland

Declaration submitted if over £200*

Yes

No

(tick as appropriate)

*A declaration signed by the responsible person must be provided in respect of the amount of each item with a value exceeding £200

Item number

Nature of expenditure

Value (£.pp)

Period/date expense incurred

 to
dd mm yyyy dd mm yyyy

Supplier

Name

Address

Town

County

Postcode

Part(s) of United Kingdom to which expenditure relates

England

Scotland

Wales

Northern Ireland

Declaration submitted if over £200*

Yes

No

(tick as appropriate)

*A declaration signed by the Responsible Person must be provided in respect of the amount of each item with a value exceeding £200

Item number Nature of expenditure
Value (£.pp)

Period/date expense incurred to
dd mm yyyy dd mm yyyy

Supplier

Name

Address

Town County Postcode

Part(s) of United Kingdom to which expenditure relates

England Scotland Wales Northern Ireland

Declaration submitted if over £200* Yes No (tick as appropriate)

*A declaration signed by the Responsible Person must be provided in respect of the amount of each item with a value exceeding £200

Item number Nature of expenditure
Value (£.pp)

Period/date expense incurred to
dd mm yyyy dd mm yyyy

Supplier

Name

Address

Town County Postcode

Part(s) of United Kingdom to which expenditure relates

England Scotland Wales Northern Ireland

Declaration submitted if over £200* Yes No (tick as appropriate)

*A declaration signed by the Responsible Person must be provided in respect of the amount of each item with a value exceeding £200

Name

Election

Date

Section D: Statement of unpaid claims
(where an application has, or is about to be, made to a court under S.92(4) of the PPERA 2000)

Number of entries made in this section

Item number

Amount of unpaid claim

Supplier

Name

Address

Part(s) of United Kingdom to which expenditure relates

Town County Postcode

England Scotland Wales Northern Ireland

Comments

Expense incurred

Invoice

Dates dd mm yyyy

Item number

Amount of unpaid claim

Supplier

Name

Address

Part(s) of United Kingdom to which expenditure relates

Town County Postcode

England Scotland Wales Northern Ireland

Comments

Expense incurred

Invoice

Dates dd mm yyyy

Name Election Date

Section E: Statement of disputed claims

Number of entries made in this section

~~Item number~~

~~Amount of disputed claim~~

~~Supplier~~

~~Name~~

~~Address~~

~~Town County Postcode~~

~~Part(s) of United Kingdom to which expenditure relates~~

~~England Scotland Wales Northern Ireland~~

~~Comments~~

~~Item number~~

~~Amount of disputed claim~~

~~Supplier~~

~~Name~~

~~Address~~

~~Town County Postcode~~

~~Part(s) of United Kingdom to which expenditure relates~~

~~England Scotland Wales Northern Ireland~~

~~Comments~~

For Electoral Commission use only

Date of receipt

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

Checked by

Date entered in database

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

Checked by

Date entered in website

<input type="text"/>	<input type="text"/>	<input type="text"/>
dd	mm	yyyy

File reference

Please return the form to:

Party and Election Finance
The Electoral Commission
Trevelyan House
30 Great Peter Street
London SW1P 2HW

Tel: 020 7271 0616

Fax: 020 7271 0505

E-mail: pef@electoralcommission.org.uk

Website: www.electoralcommission.org.uk